PART B - FEE(S) TRANSMIT	TA	1
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			• •		NSMITTAL					
Complete and send t	his form, together wi	th applicable f	ee(s), to: Ma	<u>ail</u>	Mail Stop ISSUE Commissioner fo	E FEE				
دا					P.O. Box 1450					
JUL 2 6 2005 (2)		•	or <u>F</u> a	.	Alexandria, Virg (703) 746-4000	ginia 22313	-1450			
NSTRUCTIONS Inis for	rm should be used for tran	smitting the ISSU				ired). Blocks	1 through 5 s	should be completed where		
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024587 7590 04/25/2005					Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission.					
ALCATEL USA	DD ODED TO A DED A DE	D. CENTO					iling or Trans			
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PLANO, TX 75075								date indicated below.		
07/27/2005 WASFAW2 00000156 500838 10700703					Melanie	(Depositor's name)				
01 FC:1501 1400.	00 DA				Melai	udar	(Signature)			
02 FC:1504 300.00 DA			July			/ , 200	5	(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED I	NVEN'	TOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/700,703	11/04/2003 D'Anne Beukelaer I				Ianks 135852USDIV			4988		
TITLE OF INVENTION: E	LECTRICAL SHIELD									
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APPLN. TYPE	SMALL ENTITY	ISSUE F		PUBLICATION FEE		TOTAL FEE(S) DUE		DATE DUE		
nonprovisional	nonprovisional NO		300		\$300	\$1700		07/25/2005		
EXAMINER		ART UNIT		CL	ASS-SUBCLASS					
LEE, JN	LEE, JINHEE J 2				174-03500R					
1. Change of correspondence CFR 1.363).	e address or indication of "F	ee Address" (37	-	_	he patent front page, lis		ı Richar	d A. Mysliwiec		
	ence address (or Change of	Correspondence	or agents OR	es of u	p to 3 registered paten natively,	it attorneys				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form (2) the na registered				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 Bobby D. Slaton 3 V. Lawrence Sewell						
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2										
	RESIDENCE DATA TO B		•	•	•• /					
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(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Alcatel				Fra	ance					
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the pate	ent):	Individual Co	orporation or o	ther private gr	oup entity Government		
4a. The following fee(s) are	enclosed:	4b	Payment of Fe	` '		.1				
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Publication Fee (No small entity discount permitted) Advance Order - # of Copies 5 The Director is hereby authorized by charge the required Deposit Account Number 50-0838 (enclose							ired fee(s), or	credit any overpayment, to		
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	MALL ENTITY status. See	, •	☐ b. Applican	t is no	longer claiming SMAL	LL ENTITY st	atus. See 37 C	FR 1.27(g)(2).		
The Director of the USPTO i NOTE: The Issue Fee and Pu nterest as shown by the reco	s requested to apply the Issublication Fee (if required) was rds of the United States Page	vill not be accepted	I from anyone of	or to r	e-apply any previously an the applicant; a regis	y paid issue fe stered attorney	e to the applica or agent; or the	ntion identified above. ne assignee or other party in		
Authorized Signature	Bally	Datina			Date Jul	ly 21,	2005			
Typed or printed name	Bobby D. Slator				Registration ?		43,130			
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